

<b>REIMBURSABLE WORK AUTHORIZATION</b>					1. DATE OF REQUEST		2. RWA NUMBER <i>(GSA Use Only)</i>		
3. NAME OF AGENCY					4. WORK SITE				
5A. CONTACT'S NAME					5D. CONTACT'S ADDRESS				
5B. CONTACT'S TELEPHONE NO.		AREA CODE	PHONE NUMBER	EXT.					
5C. CONTACT'S FAX NUMBER		AREA CODE	PHONE NUMBER						
5E. CONTACT'S E-MAIL									
6. DETAILED DESCRIPTION OF REQUESTED WORK									
CHECK AS APPROPRIATE		10. REQUESTED WORK DATES			13A. FED CODE		13B. BUREAU CODE		
7. PLANS ATTACHED		A. START:			14A. AGENCY FINANCE BILLING OFFICE				
8. MOD		B. COMPLETION:							
9A. BILLING TYPE	9B. BILLING TERMS	11. AMOUNT CERTIFIED BY AGENCY			14B. STREET ADDRESS				
12A. AGENCY LOCATION CODE		12B. AGENCY ID NO.	12C. FUND CODE		14C. CITY		14D. STATE	14E. ZIP	
12D. AGENCY ACCOUNTING DATA <i>(Limited to 60 characters)</i>					16A. CREDIT CARD NUMBER		16B. EXPIRATION DATE		
15A. CERTIFICATION SIGNATURE			15B. DATE		16C. TYPE OF CARD <i>(i.e., VISA)</i>		16D. NAME OF CARD HOLDER		
15C. NAME OF SIGNER					17. TELEPHONE NUMBER OF CERTIFYING OFFICIAL				
					AREA CODE	PHONE NUMBER		EXT.	
NOTE: GSA will bill in accordance with FPMR Part 101-21.604(e)									
<b>FOR GENERAL SERVICES ADMINISTRATION USE ONLY</b>									
18.PROJECT NO.		19A. ORGANIZATION CODE		19B. B/A CODE		19C. BOAC CODE		19D. CORRES. SYMBOL	
20. BRIEF PROJECT DESCRIPTION <i>(Limited to 25 characters)</i>									
21. ACTION <i>(Check one)</i>					22. PLEASE CHECK IF APPROPRIATE				
<input type="checkbox"/> NEW <input type="checkbox"/> CHANGE <input type="checkbox"/> DELETE <input type="checkbox"/> COMPLETE					<input type="checkbox"/> COST BREAKDOWN ATTACHED <input type="checkbox"/> MULTIPLE BLDG./FUNCTION <i>(See reverse)</i>				
<input type="checkbox"/> 23. FIXED PRICE DOES NOT APPLY			<input type="checkbox"/> 24. GUARANTEE DOES NOT APPLY			25. AGREED UPON COMPLETION DATE			
26A. ORGANIZATION CODE	26B. BUILDING NUMBER	26C. LEASE NUMBER	26D. FUNCTION CODE	26E. O/C		26F. TOTAL			
26G. GRAND TOTAL									
27A. GSA APPROVING OFFICIAL'S SIGNATURE			27B. DATE		27C. TELEPHONE				
					AREA CODE		NUMBER	EXT.	
27D. NAME					28. POINT OF SALE TERMINAL <i>(For credit card purchases only)</i>				
					<input type="checkbox"/> A. FINANCE <input type="checkbox"/> B. PBS				
29A. CERTIFICATE OF COMPLETION SIGNATURE					29B. SIGNER'S NAME <i>(Type or Print)</i>			29C.COMPLETION DATE	

GENERAL: Keep a copy for your record and forward one copy to your obligating/paying office.

**SPECIFIC ITEM**

**NO.**      **SPECIFIC ITEM**

1.      Enter date of work request.
2.      *For GSA Use Only.*
3.      Enter name of agency requesting the work.
4.      Enter location where work is to be performed. If multiple locations, use attachment (below).
- 5A-E.      Enter information regarding the individual with the authority to make decisions regarding the project.
6.      Enter a concise statement of work to be done, including location where work is to be performed.
7.      Check if agency plans are attached.
8.      Check if submittal is a modification to an existing RWA.
- 9A.      Enter billing type: 1 = Interfund, C = CreditCard, P = Prepaid.
- 9B.      Enter billing terms: A = Advance, C = At completion, M = Monthly, Q = Quarterly, T = At termination, Y = Annually (in arrears), non-recurring RWA's under \$25,000 will be billed at project completion. Default for billing is monthly for projects over \$25,000.
- 10A-B.      Enter requested project start and completion dates.
11.      Enter the total dollar amount approved for funding. Must match GSA's cost quote.
- 12A.      Enter the eight (8) character Agency Location Code. (Treasury Pay-Station Designator)
- 12B.      Enter the appropriate agency identification number.
- 12C.      Enter the appropriate agency fund code.
- 12D.      Enter agency accounting information (limited to 60 characters). **THIS WILL APPEAR ON YOUR BILL.**
- 13A.      Enter the agency Fed Code.
- 13B.      Enter the agency Bureau Code.
- 14A-E.      Enter the appropriate billing address information.
- 15A-C.      Enter the date, signature, and name of agency's authorized representative, certifying the validity of order and the availability of funds.
- 16A-D.      Enter the credit card number, type of card, card holder's name, and expiration date. (You may contact your GSA Representative and provide the information confidentially.)
- 16E.      Enter the certifying official's phone number.

**GSA USE ONLY**

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18. Enter project number, if applicable.
- 19.A-D. Enter: a. GSA Organization Code, b. B/A code, c. BOAC code, and d. the Organization Correspondence Symbol.
20. Enter a brief project description, limited to 25 characters.
21. Check the appropriate action block.
22. Check box(es) if appropriate.
23. Check if the project is **NOT** fixed price. If the project is to be actual cost instead of fixed price, the requesting agency contact should be advised that his/her agency is responsible for all actual costs, including overhead.
24. Check if the guarantee **DOES NOT** apply.
25. Enter the mutually agreed upon completion date.
- 26A-G. Enter the Organization Code, Building Number, Lease Number, Function Code, Object Class, Total Dollar Amount, and Grand Total.
- 27A-D. Enter the signature, name, date, and telephone number of the GSA Approving Official.
28. Enter the Point of Sale Terminal (for Credit Card Purchases Only).
29. Enter the certificate of completion signature, name, and date when the project was physically completed.

## ATTACHMENT - MULTIPLE BUILDINGS/MULTIPLE FUNCTION

[illegible]